

ESSEX HEIGHTS PRIMARY SHOOL ANAPHYLAXIS POLICY



Help for non-English speakers

If you need help to understand the information in this policy please contact Essex Heights Primary School on 9807 4944.

PURPOSE

To explain to Essex Heights Primary School parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Essex Heights Primary School is compliant with Ministerial Order 706 and the Department's guidelines for anaphylaxis management.

SCOPE

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis, or who may require emergency treatment for an anaphylactic reaction, and their parents and carers.

POLICY

School Statement

Essex Heights Primary School will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education and Training.

Anaphylaxis

Anaphylaxis is a severe allergic reaction that occurs after exposure to an allergen. The most common allergens for school-aged children are nuts, eggs, cow's milk, fish, shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Symptoms

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth.

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue

- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

Treatment

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline auto injector for use in an emergency. These adrenaline auto injectors are designed so that anyone can use them in an emergency.

Individual Anaphylaxis Management Plans

All students at Essex Heights Primary School who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Principal of Essex Heights Primary School is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrols at Essex Heights Primary School and where possible, before the student's first day.

Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline auto injector for the student that has not expired;
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies, which have been identified in the Plan
- information about where the student's medication will be stored
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

Review and updates to Individual Anaphylaxis Management Plans

A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

Location of plans and adrenaline auto injectors

Example for when students will not keep their adrenaline auto injectors on their person:

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the Health Centre in the Admin building, together with the student's adrenaline auto injector. Adrenaline auto injectors must be labelled with the student's name.

Example for when students will keep their adrenaline auto injectors on their person:

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the Health Centre in the Administration building. Students are encouraged to keep their adrenaline auto injectors on their person. Adrenaline auto injectors for general use are available at the Health Centre in the Administration building and are labelled "general use".

Example for where some students keep their adrenaline auto injectors on their person and others store them elsewhere:

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis at the Health Centre in the Administration building. Whilst some students keep their adrenaline auto injector on their person, medication for those that do not will be stored and labelled with their name at Health Centre in the Administration building, together with adrenaline auto injectors for general use.

Risk Minimisation Strategies

To reduce the risk of a student suffering from an anaphylactic reaction at Essex Heights Primary School, we have put in place the following strategies:

- staff and students are regularly reminded to wash their hands after eating
- students are discouraged from sharing food
- garbage bins at school are to remain covered with lids to reduce the risk of attracting insects
- gloves must be worn when picking up papers or rubbish in the playground;
- school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays
- a general use adrenaline auto injector will be stored at the Health Centre in the Administration building for ease of access
- planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and students attending.

Adrenaline auto injectors for general use

Essex Heights Primary School will maintain a supply of 3 adrenaline auto injectors for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school.

Adrenaline auto injectors for general use will be stored at the Health Centre in the Administration building and labelled "general use".

The Principal is responsible for arranging the purchase of adrenaline auto injectors for general use, and will consider:

- the number of students enrolled at Essex Heights Primary School at risk of anaphylaxis
- the accessibility of adrenaline auto injectors supplied by parents
- the availability of a sufficient supply of auto injectors for general use in different locations at the school, as well as at camps, excursions and events
- the limited life span of adrenaline auto injectors, and the need for general use adrenaline auto injectors to be replaced when used or prior to expiry
- the weight of the students at risk of anaphylaxis to determine the correct dosage of adrenaline auto injector/s to purchase.

Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up-to-date list of students identified as being at risk of anaphylaxis is maintained by Julie Zuk, First Aid Officer and stored at the Health Centre in the Administration building. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline auto injectors, where appropriate.

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

a.	
Step	Action
1.	Lay the person flat
	Do not allow them to stand or walk
	If breathing is difficult, allow them to sit
	Be calm and reassuring
	Do not leave them alone
	• Seek assistance from another staff member or reliable student to locate the student's adrenaline auto injector or the school's general use auto injector, and the student's Individual Anaphylaxis Management Plan, stored at the Health Centre in the Administration building
	• If the student's plan is not immediately available, or they appear to be
	experiencing a first time reaction, follow steps 2 to 5
2.	Administer an EpiPen or EpiPen Jr
	Remove from plastic container
	• Form a fist around the EpiPen and pull off the blue safety release (cap)
	• Place orange end against the student's outer mid-thigh (with or without clothing)
	 Push down hard until a click is heard or felt and hold in place for 3 seconds
	Remove EpiPen
	Note the time the EpiPen is administered
	Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration
	OR

	Administer an Anapen® 500, Anapen® 300, or Anapen® Jr.		
	Pull off the black needle shield		
 Pull off grey safety cap (from the red button) 			
• Place needle end firmly against the student's outer mid-thigh at 90 degrees or without clothing)			
	 Press red button so it clicks and hold for 10 seconds 		
Remove Anapen®			
	Note the time the Anapen is administered		
	• Retain the used Anapen to be handed to ambulance paramedics along with the		
	time of administration		
3.	Call an ambulance (000)		
4.	4. If there is no improvement or severe symptoms progress (as described in the ASCI		
	Action Plan for Anaphylaxis), further adrenaline doses may be administered every f		
minutes, if other adrenaline auto injectors are available.			
5.	Contact the student's emergency contacts.		

If a student appears to be having a severe allergic reaction but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2-5 as above.

Schools can use either the EpiPen® and Anapen® on any student suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

Where possible, schools should consider using the correct dose of adrenaline autoinjector depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student.

Communication Plan

This policy will be available on Essex Heights Primary School's website so that parents and other members of the school community can easily access information about Essex Heights Primary School's anaphylaxis management procedures. The parents and carers of students who are enrolled at Essex Heights Primary School and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The Principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Essex Heights Primary School's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The Principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department's <u>Anaphylaxis Guidelines</u>.

Staff training

The Principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

- school staff who conduct classes attended by students who are at risk of anaphylaxis
- school staff who conduct specialist classes, all canteen staff, admin staff, first aiders and any other member of school staff as required by the principal based on a risk assessment.

Staff who are required to undertake training must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Essex Heights Primary School uses the following training course: ASCIA eTraining course (with 22579VIC, or 22578VIC or 10710 NAT).

[Note, for details of approved staff training modules, refer to chapter 5 of the Anaphylaxis Guidelines]

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years including Julie Zuk, First Aid Officer. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
- how to use an adrenaline auto injector, including hands on practice with a trainer adrenaline auto injector
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline auto injectors that have been provided by parents or purchased by the school for general use.

When a new student enrols at Essex Heights Primary School who is at risk of anaphylaxis, the Principal will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.

A record of staff training courses and briefings will be maintained on the school's server at Staff Shared/First Aid/First Aid Register and a paper copy in the Health Centre.

The Principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

APPENDICES

- A Annual Risk management Checklist
- B Anaphylaxis Communication Plan
- C Suggested Strategies to Avoid Allergens

FURTHER INFORMATION AND RESOURCES

- The Department's Policy and Advisory Library (PAL): Anaphylaxis
- Allergy & Anaphylaxis Australia
- ASCIA Guidelines: Schooling and childcare
- Royal Children's Hospital: Allergy and immunology
- EHPS Health Care Needs Policy.

POLICY REVIEW AND APPROVAL

Policy last reviewed	May 2022
Approved by	Principal
Next scheduled review date	May 2023

George Perini	Jennifer Bittner
School Principal	School Council President
School Council – May 2022	

The Principal will complete the Department's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students

at risk of anaphylaxis.

Appendix A

Annual Risk Management Checklist

School Name:			
Date of Review:			
Who completed	Name:		
this checklist?	Position:		
Review given to:	Name		
<u> </u>	Position		
Comments:			
General Informat	ion		
	rrent students have been diagnosed as being at risk of anaphylaxis,		
	n prescribed an Adrenaline Autoinjector?	ı	
	, , , , , , , , , , , , , , , , , , , ,		
2. How many of	these students carry their Adrenaline Autoinjector on their person?	İ	
3. Have any stud	lents ever had an allergic reaction requiring medical intervention at	☐ Yes	□ No
school?	54,2	1	
a. If Yes, how	v many times?	ı	
4. Have any stud	lents ever had an Anaphylactic Reaction at school?	☐ Yes	□ No
a If Voc hou	u manu etudante?		
a. If Yes, how	v many students?		
b. If Yes, how	v many times	ı	
5. Has a staff me	ember been required to administer an Adrenaline Autoinjector to a	☐ Yes	□ No
student?		ı	
a. If Yes, hov	v many times?		
a. 11 163, 110	villarly times:	ı	
6. Was every inc	ident in which a student suffered an anaphylactic reaction reported	☐ Yes	☐ No
via the Incide	nt Reporting and Information System (IRIS)?	ı	
SECTION 1: Indivi	dual Anaphylaxis Management Plans		
7. Does every st	udent who has been diagnosed as being at risk of anaphylaxis and	☐ Yes	☐ No
•	Adrenaline Autoinjector have an Individual Anaphylaxis	İ	
_	Plan and ASCIA Action Plan completed and signed by a prescribed	İ	
Medical Pract	itioner?	Í	
Q Ara all Individ	ual Anaphylavic Management Blanc reviewed regularly with Perents	☐ Yes	□ No
	ual Anaphylaxis Management Plans reviewed regularly with Parents	⊔ res	
(at least annu	any):	İ	
9. Do the Individ	lual Anaphylaxis Management Plans set out strategies to minimise		
	posure to allergens for the following in-school and out of class	1	
settings?	3	1	
<u> </u>			

a. During classroom activities, including elective classes	☐ Yes	□ No
b. In canteens or during lunch or snack times	☐ Yes	□ No
c. Before and after School, in the school yard and during breaks	☐ Yes	□ No
d. For special events, such as sports days, class parties and extra-curricular activities	☐ Yes	□ No
e. For excursions and camps	☐ Yes	□ No
f. Other	☐ Yes	□ No
10. Do all students who carry an Adrenaline Autoinjector on their person have a copy of their ASCIA Action Plan kept at the School (provided by the Parent)?	☐ Yes	□ No
a. Where are they kept?		
11. Does the ASCIA Action Plan include a recent photo of the student?	☐ Yes	□ No
SECTION 2: Storage and Accessibility of Adrenaline Autoinjectors		
12. Where are the student(s) Adrenaline Autoinjectors stored?		
13. Do all School Staff know where the School's Adrenaline Autoinjectors for General Use are stored?	☐ Yes	□ No
14. Are the Adrenaline Autoinjectors stored at room temperature (not refrigerated)?	☐ Yes	□ No
15. Is the storage safe?	☐ Yes	□ No
16. Is the storage unlocked and accessible to School Staff at all times?	☐ Yes	□ No
Comments:		
17. Are the Adrenaline Autoinjectors easy to find?	☐ Yes	□ No
Comments:		
18. Is a copy of student's Individual Anaphylaxis Management Plan (including the ASCIA Action Plan) kept together with the student's Adrenaline Autoinjector?	☐ Yes	□ No
19. Are the Adrenaline Autoinjectors and Individual Anaphylaxis Management Plans (including the ASCIA Action Plans) clearly labelled with the student's names?	☐ Yes	□ No
20. Has someone been designated to check the Adrenaline Autoinjector expiry dates on a regular basis?	☐ Yes	□ No
Who?	□ Vaa	□ NI≏
School and which have expired?	⊔ Yes	⊔ No

22.	Has the School signed up to EpiClub or ANA-alert (optional free reminder services)?	∐ Yes	⊔ No
23.	Do all School Staff know where the Adrenaline Autoinjectors and the Individual Anaphylaxis Management Plans are stored?	☐ Yes	□ No
24.	Has the School purchased Adrenaline Autoinjector(s) for General Use, and have they been placed in the School's first aid kit(s)?	☐ Yes	□ No
25.	Where are these first aid kits located?		
26.	Is the Adrenaline Autoinjector for General Use clearly labelled as the 'General Use' Adrenaline Autoinjector?	☐ Yes	□ No
27.	Is there a register for signing Adrenaline Autoinjectors in and out when taken for excursions, camps etc?	☐ Yes	□ No
SEC	CTION 3: Prevention Strategies		
28.	Have you done a risk assessment to identify potential accidental exposure to allergens for all students who have been diagnosed as being at risk of anaphylaxis?	☐ Yes	□ No
29.	Have you implemented any of the prevention strategies in the Anaphylaxis Guidelines? If not record why?	☐ Yes	□ No
30.	Have all School Staff who conduct classes with students with a medical condition that relates to allergy and the potential for anaphylactic reaction successfully completed an Anaphylaxis Management Training Course in the three years prior and participated in a twice yearly briefing?	☐ Yes	□ No
31.	Are there always sufficient School Staff members on yard duty who have successfully completed an Anaphylaxis Management Training Course in the three years prior?	☐ Yes	□ No
SEC	TION 4: School Management and Emergency Response		
32.	Does the School have procedures for emergency responses to anaphylactic reactions? Are they clearly documented and communicated to all staff?	☐ Yes	□ No
33.	Do School Staff know when their training needs to be renewed?	☐ Yes	□ No
34.	Have you developed Emergency Response Procedures for when an allergic reaction occurs?	☐ Yes	□ No
	a. In the class room?	☐ Yes	□ No
	b. In the school yard?	☐ Yes	□ No
	c. In all School buildings and sites, including gymnasiums and halls?	☐ Yes	□ No
	d. At school camps and excursions?	☐ Yes	□ No

	e. On special event days (such as s by the School?	sports days) conducted, organised or attended	☐ Yes	□ No
35.	5. Does your plan include who will cal	I the Ambulance?	☐ Yes	□ No
36.		vill be sent to collect the student's Adrenaline Plaxis Management Plan (including the ASCIA	□ Yes	□ No
37.	•	ake to get to the Adrenaline Autoinjector and it Plan (including the ASCIA Action Plan) to a chool including:	☐ Yes	□ No
	a. The class room?		☐ Yes	□ No
	b. The school yard?		☐ Yes	□ No
	c. The sports field?		☐ Yes	□ No
38.	for ensuring the Adrenaline Autoinj Management Plans (including the A	ol events is there a plan for who is responsible ector(s) and Individual Anaphylaxis ascIAAction Plan) and the Adrenaline errectly stored and available for use?	☐ Yes	□ No
39.	9. Who will make these arrangements	during excursions?		
40.	D. Who will make these arrangements	during camps?		
41.	Who will make these arrangements	during sporting activities?		
42.	2. Is there a process for post incident	support in place?	☐ Yes	□ No
43.	3. Have all School Staff who conduct c	classes that students with a medical condition		
	that relates to allergy and the poter other staff identified by the Principal other staff.	ntial for an anaphylactic reaction and any al, been briefed on:		
	a. The School's Anaphylaxis Mana	gement Policy?	☐ Yes	□ No
	b. The causes, symptoms and trea	tment of anaphylaxis?	☐ Yes	□ No
	the potential for an anaphylacti	a medical condition that relates to allergy and ic reaction, and who are prescribed an ing where their medication is located?	☐ Yes	□ No
	d. How to use an Adrenaline Auto trainer Adrenaline Autoinjector	injector, including hands on practise with a ?	☐ Yes	□ No
	e. The School's general first aid an school and out-of-school enviro	nd emergency response procedures for all in- onments?	☐ Yes	□ No
	f. Where the Adrenaline Autoinje	ctor(s) for General Use is kept?	☐ Yes	□ No
	g. Where the Adrenaline Autoinje including if they carry it on their	ctors for individual students are located r person?	☐ Yes	□ No

SECTION 4: Communication Plan	
44. Is there a Communication Plan in place to provide information about anaphylaxis	
and the School's policies?	
a. To School Staff?	☐ Yes ☐ No
b. To students?	☐ Yes ☐ No
c. To Parents?	☐ Yes ☐ No
d. To volunteers?	☐ Yes ☐ No
e. To casual relief staff?	☐ Yes ☐ No
45. Is there a process for distributing this information to the relevant School Staff?	☐ Yes ☐ No
a. What is it?	
46. How is this information kept up to date?	
47. Are there strategies in place to increase awareness about severe allergies among students for all in-school and out-of-school environments?	☐ Yes ☐ No
48. What are they?	

Appendix B

ANAPHYLAXIS COMMUNICATION PLAN

This Communication Plan supports the Essex Heights PS Anaphylaxis Policy

- Ministerial order 706 and associated guidelines on Anaphylaxis management are now in effect as of 22/4/2014
- All staff are now required to do the training every 2 years of the online ASCIA Anaphylaxis
 - e-training course as of 2016 available on the ASCIA website –ASCIA e-training for Victorian Schools, and verified by staff that have completed the course in Verifying the Correct use of Adrenaline Auto-injector Devices 22303VIC, valid for 3 years. Or staff have had training in First Aid Management of Anaphylaxis-course number 22099VIC every 3 years
- Twice yearly staff presentations to all staff as per DET guidelines. This presentation is available to all staff on the server - under staff shared-2017 power point anaphylaxis. During this talk, the practice auto adrenaline injectors will be used for all staff to be familiar with
- A list of up to date health needs relevant to students in a particular class will be made available to CRT staff through the classroom information yellow folder.
- All specialist areas receive a folder listing all children with medical needs
- Anaphylaxis ASCIA plans are on display in the staffroom, Health centre and inside each class attendance folder so it is available to all staff including CRTs
- When parents complete and annually review an Anaphylaxis Management plan, they are provided with an information sheet including strategies for dealing with allergens (Appendix C)
- The school will disseminate relevant information about anaphylaxis if directed to do so by DET or other relevant Departments.
- Parents will be notified by letter or phone calls to remind them about expiry dates and the need for replacement Epipens.
- Staff are required to provide the EHPS Health Centre with notice about excursions to ensure all required medication is sent for the student for whom it is prescribed.
- Classroom teachers will promote hand washing and discourage the sharing of food.
- If birthday treats are brought in, parents / guardians are requested to provide a list of ingredients. Parents of children diagnosed with anaphylaxis are asked to supply an alternative treat.
- At the start of each school year, parents will be alerted to the presence of allergies in their
 - child's classroom.
- In the event of outings / excursions / camps, all staff and volunteers attending the excursion should be made aware of the anaphylactic children and their risk management plan.